

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF  
COMMITTEE (in full)☐(Check if name  
is changed)Example: If typing, type  
over the lines

12FE4M5

**Brady Campaign to Prevent Gun Violence - Voter Education Fund**

ADDRESS (number and street)

**1225 Eye St. NW, Suite 1100**☐(Check if address  
is changed)**Washington****DC****20005**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

M M  
0 6/ D D  
2 9/ Y Y Y Y  
2 0 0 1

3. FEC IDENTIFICATION NUMBER

**C C00113449**

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

**Mark Ingram**

Signature of Treasurer

Electronically Filed by **Mark Ingram**

Date

M M  
0 3/ D D  
0 6/ Y Y Y Y  
2 0 0 6

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2003)

## 5. TYPE OF COMMITTEE (Check One)

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of  
CandidateCandidate  
Party AffiliationOffice  
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of  
Candidate

- (d) ☐ This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) ☒ This committee is a separate segregated fund

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

## 6. Name of Any Connected Organization or Affiliated Committee

Brady Campaign to Prevent Gun Violence

Mailing Address

1225 Eye St. NW #1100

Washington

DC

20005

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Connected

Type of Connected Organization:

- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☒ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

**Brady Campaign to Prevent Gun Violence - Voter Education Fund**

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Kathleen Brewster**

Mailing Address **1225 Eye St NW #1100**

**Washington** **DC** **20005** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Custodian of Records** Telephone number **202** **898** **0792**

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Mark Ingram**

Mailing Address **Brady Campaign**

**1225 Eye St. NW #1100**

**Washington** **DC** **20005** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Treasurer** Telephone number **202** **898** **0792**

Full Name of Designated Agent **Kathleen Brewster**

Mailing Address **1225 Eye St NW #1100**

**Washington** **DC** **20005** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Asst. Treasurer** Telephone number **202** **898** **0792**

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	<b>Suntrust Bank</b>																																		
Mailing Address	<b>Box 26150</b>																																		
	<b>Richmond</b>															<b>VA</b>					<b>23260</b>					-									
	CITY ▲															STATE ▲					ZIP CODE ▲														